



1-17-02

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PTO/SB/82 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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| | |
|------------------------|------------|
| Application Number | 09/625,226 |
| Filing Date | 7/24/2000 |
| First Named Inventor | |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | |

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|-------------|
| Name | Liza Meyers |
| Signature | |
| Date | 05.24.02 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

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2625

PTO/SB/21 (08-00)

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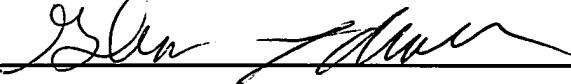
(to be used for all correspondence after initial filing)

| | |
|--|------------------------|
| Application Number | 09625,226 |
| Filing Date | 07/24/2000 |
| First Named Inventor | RECEIVED |
| Group Art Unit | DEC 18 2002 |
| Examiner Name | Technology Center 2800 |
| Total Number of Pages in This Submission | |
| Attorney Docket Number | |

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| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group. |
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| <input type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |
| | Remarks | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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| Firm or Individual name | Glenn L. Webb |
| Signature |  |
| Date | 12/07/2002 |

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mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 12/09/2002

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| Typed or printed name | Glenn L. Webb |
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